



OFFICE OF THE ASSISTANT SECRETARY OF DEFENSE
HEALTH AFFAIRS

16401 EAST CENTRETECH PARKWAY
AURORA, COLORADO 80011-9066

TRICARE
MANAGEMENT ACTIVITY

MB&RS

CHANGE 16
6010.47-M
SEPTEMBER 25, 2003

PUBLICATIONS SYSTEM CHANGE TRANSMITTAL
FOR
TRICARE POLICY MANUAL

The TRICARE Management Activity has authorized the following addition(s)/revision(s) to the 6010.47-M, reissued March 2002.

CHANGE TITLE: INTRACORONARY STENTS & FDA APPROVED
CATEGORY B (IDE) DEVICES

PAGE CHANGE(S): See page 2.

SUMMARY OF ADDITIONS/REVISIONS: This change expands coverage for drug eluting stents, removes the exclusions, and adds coverage for FDA Category B (IDE) devices that were the subject of an FDA approved clinical trials with FDA approval for commercial marketing.

EFFECTIVE DATE AND IMPLEMENTATION: The Effective Date is April 24, 2003. The Implementation Date is upon direction of the Contracting Officer.

Barbara J. Gallegos
Barbara J. Gallegos
Director, Office of Medical Benefits
and Reimbursement Systems

ATTACHMENT(S): 3 PAGE(S)
DISTRIBUTION: 6010.47-M

WHEN PRESCRIBED ACTION HAS BEEN TAKEN, FILE THIS TRANSMITTAL WITH BASIC DOCUMENT

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CHAPTER 3

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CHAPTER 7

Section 10.1, page 3

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